

AMENDED IN ASSEMBLY MAY 3, 2006

AMENDED IN ASSEMBLY APRIL 6, 2006

CALIFORNIA LEGISLATURE—2005–06 REGULAR SESSION

## ASSEMBLY BILL

**No. 2651**

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**Introduced by Assembly Member Jones**

February 24, 2006

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An act to amend Sections 124116.5, 124118, and 124119 of the Health and Safety Code, relating to public health.

### LEGISLATIVE COUNSEL'S DIGEST

AB 2651, as amended, Jones. Newborns: hearing screening.

The existing Newborn and Infant Hearing Screening, Tracking, and Intervention Act requires that every California Children's Services (CCS)-approved general acute care hospital with licensed perinatal services offer all parents of a newborn, upon birth admission, a hearing screening test for the identification of hearing loss, using protocols approved by the State Department of Health Services or its designee.

This bill would, instead, require that this hearing screening be offered, on and after January 1, 2008, to every newborn, ~~except as provided~~, by every general acute care hospital with licensed perinatal services, and would make related changes to the program. *It would permit certain hospitals to contract for the provision of this service.*

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

SECTION 1. Section 124116.5 of the Health and Safety Code is amended to read:

124116.5. (a) (1) Every general acute care hospital with licensed perinatal services in this state shall, on and after January 1, 2008, administer to every newborn, upon birth admission, a hearing screening test for the identification of hearing loss, using protocols approved by the department or its designee.

(2) In order to meet the department's certification criteria, a hospital shall be responsible for developing a screening program that provides competent hearing screening, utilizes appropriate staff and equipment for administering the testing, completes the testing prior to the newborn's discharge from a newborn nursery unit, refers infants with abnormal screening results, maintains and reports data as required by the department, and provides physician and family-parent education.

(b) A hearing screening test provided for pursuant to subdivision (a) shall be performed by a licensed physician, licensed registered nurse, licensed audiologist, or an appropriately trained individual who is supervised in the performance of the test by a licensed health care professional.

(c) Every general acute care hospital that has licensed perinatal services that provides care in less than 100 births annually ~~may, in lieu of providing~~ shall, if it does not directly provide a hearing screening test, ~~refer newborns to a nearby hospital that does provide the hearing screening test enter into an agreement with an outpatient infant hearing screening provider certified by the department to provide hearing screening tests.~~

(d) This section shall not apply to any newborn whose parent or guardian objects to the test on the grounds that the test is in violation of his or her religious beliefs or practices.

SEC. 2. Section 124118 of the Health and Safety Code is amended to read:

124118. The department or its designee shall provide every birthing center, or clinic, acute care hospital that has licensed perinatal services, or neonatal intensive care unit (NICU), as specified in Section 123975, written information on the current and most effective means available to screen the hearing of newborns and infants, and shall provide technical assistance and

1 consultation to these hospitals in developing a system of  
2 screening each newborn and infant receiving care at the facility.  
3 The information shall also include the mechanism for referral of  
4 newborns and infants with abnormal test results.

5 SEC. 3. Section 124119 of the Health and Safety Code is  
6 amended to read:

7 124119. (a) The department shall develop and implement a  
8 reporting and tracking system for newborns and infants tested for  
9 hearing loss.

10 (b) The system shall provide the department with information  
11 and data to effectively plan, establish, monitor, and evaluate the  
12 Newborn and Infant Hearing Screening, Tracking and  
13 Intervention Program, including the screening and followup  
14 components, as well as the comprehensive system of services for  
15 newborns and infants who are deaf or hard-of-hearing and their  
16 families.

17 (c) Every birthing center or clinic or acute care hospital with  
18 licensed perinatal services, or NICU in this state shall report to  
19 the department or the department's designee information as  
20 specified by the department to be included in the department's  
21 reporting and tracking system.

22 (d) All providers of audiological followup and diagnostic  
23 services provided under this article shall report to the department  
24 or the department's designee information as specified by the  
25 department to be included in the department's reporting and  
26 tracking system.

27 (e) The information compiled and maintained in the tracking  
28 system shall be kept confidential in accordance with Chapter 5  
29 (commencing with Section 10850) of Part 1 of Division 9 of the  
30 Welfare and Institutions Code, the Information Practices Act of  
31 1977 (Chapter 1 (commencing with Section 1798) of Title 1.8 of  
32 Part 4 of Division 3 of the Civil Code), and the applicable  
33 requirements and provisions of Part C of the federal Individuals  
34 with Disabilities Education Act (20 U.S.C. Sec. 1475 et seq.).

35 (f) Data collected by the tracking system obtained directly  
36 from the medical records of the newborn or infant shall be for the  
37 confidential use of the department and for the persons or public  
38 or private entities that the department determines are necessary to  
39 carry out the intent of the reporting and tracking system.

1 (g) A health facility, clinical laboratory, audiologist,  
2 physician, registered nurse, or any other officer or employee of a  
3 health facility or laboratory or employee of an audiologist or  
4 physician, shall not be criminally or civilly liable for furnishing  
5 information to the department or its designee pursuant to the  
6 requirements of this section.

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